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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FUATHAN FISH FARM UC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Educido Honordez Sotero Name of Person
Evertigh Fish FARMUC "
422 E 45Th ST Address
Halean, FL 32013. City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Eduardo Herrandez Sotero ai 805, 785-2020 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy} \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 MAY 24 PM 3: 16

EVERHAN F (Name of the Limited Liability (A Florida	Sh Farm UC y Company as it now appears Limited Liability Company)	SECRETARY OF STATE TALL HASSEE, FLORIDA on our records:	
	Company were filed on		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Compar	y." the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	(Name of the Limited Liability Company as it now appears on our records.) (Name of the Limited Liability Company was it now appears on our records.) (A Florida Limited Liability Company) ation for this Limited Liability Company were filed on		
(Principal office address MUST BE A STREET ADD	÷ 1		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		ur records, enter the name of the new	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	· <u> </u>		
	Ent	er Florida street address	
		, Florida	
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or. if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> **Name Address** Eduardo Herrandoz - 422 E 45Th ST

Remove

If an	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	·		
ed	May 17 , 2013		
	Signature of a member or authorized representative of a member		
	Edvardo Hemande 2 Sotero Typed or printed name of signee		
	r yped or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00